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for one year and be under observance for several years thereafter. A secondary case should be under treatment for four or five years. Those can almost invariably be cleared up showing no reaction, but the continued treatment is most essential. No one can tell how long it will take to clear up gonorrhoea. Occasionally we find the kidneys involved.

Locomotor ataxia is due to syphilis and syphilis alone. High mortality in our infants and the large percentage of miscarriages are due to syphilis. We lost 80,000 soldiers during the war; during the same period of time there were 156,000 deaths from tuberculosis, 180,000 deaths from cancer, and 243,000 deaths from syphilis. It is our greatest killing disease.

In the past there has been a great deal of carelessness and ignorance in the treatment of venereal disease. That has been changed and it is now on a higher plane. Quacks have been eliminated; they have not the hold that they had in the past, largely because of education. We need to talk about these matters openly and frankly in order to make real progress. Whenever the opportunity presents itself, the nurse should teach the duty of the parents to instruct their children. If the parent does not instruct the child he will get it from the gutter in a nasty way. Do not tell the children that the stork brought the baby, especially in the rural communities where the children are associated with animals. When the child asks questions give him an answer and tell him you will explain further when he is older.

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### “CARRY ON”

BY BERTHA ESTELLE MERRILL, R.N.

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**I**T is true a nurse may do efficient work for years without affiliating with the various nursing organizations. It is also true that she could make a better record for a longer period if she marched shoulder to shoulder with that band of earnest workers who are aiming to reach and maintain a standard of excellence worthy of their calling.

Probably in clubs and organizations everywhere the members could be classed under two groups—leaders and leaners; but because I am best acquainted with organizations related to our profession, it seems as though we have an unnecessarily long list in the “leaner” group. If you wish to know to which class you belong, ask yourself this question: “If every member put into the association the same amount of money, time and talent I do, what kind of an association

would it be?" And I might add, unless you have been closely associated with the work and fully realize how much *some one* has to do, you had better cut the estimate of your work in half.

Three prerequisite elements that must be combined for the making of every organization are: talent—call it brains if you like—energy and money. The quality of talent and time given are more important than the quantity of money. The success of the organization depends upon how evenly these elements are apportioned among its membership. No organization that is democratic in its aims can long survive an oligarchical regime, which means that in order to accomplish the object for which it was originated, the work must not be left to a willing few. Some members are under the impression that if they have given the required amount of money, they have done their share and it is the duty of the association to do the rest. To that member I would say, "You have not paid your dues; unless you have given of your time and energy, you are delinquent."

Nurses are naturally altruistic. The conditions under which they work promote that characteristic. The ability to assume responsibility is another essential of a good nurse. This would go to prove that the indifferent nurse who is so trying to the working members, is the result of not grasping the situation and realizing wherein the responsibility lies, rather than the desire to evade an obligation.

During the years of our training, the rules governing our work, the standards set and the methods followed were all decided for us. Naturally after three years dependency upon a pedagogical government, it takes some time to adjust ourselves to a new form of rule and to appreciate our responsibilities as well as our opportunities. However, the day we graduated the old order changed—along with other things—and we were one of a force of democratic workers who aim to make their own high standards. Whether the profession was elevated or lowered by our work depended upon what our standards were and how much of ourselves we gave to accomplish and uphold them.

"Elevate the profession." How we love to roll that phrase upon our tongues! I am proud we do. It will be a sad day for the profession when its members cease to do so. But we must remember that dues alone can accomplish nothing. As a prominent artist said of his paints, "They must be mixed with brains" to get results. The nurse who is paying monetary dues only is not helping to elevate the profession one iota. She is a "leaner" and is reaping the benefits of some other member's efforts. She usually belongs to that class who do not attend meetings for fear of being asked to serve. During the war we learned another name for that type. Do not merit it.

Another thing we learned during the war was how wonderful were results when every one did his bit. We never before realized the tremendous force of teamwork. If all members would use those qualities augmented by our training—earnestness, altruism, accountability and self-sacrifice—to help uphold the ideals we all long for, the apathy that frequently handicaps us would vanish. Our standards would be apparent even to "him who runs" and taunts of "commercialism" and "closed shop" would never reach us.

Then there are members who attend the meetings quite regularly but seem diffident about taking active part. This seems particularly true in the private duty section. When approached they usually offer one of three excuses. One is, "I am on a case." Being on a case is an excellent excuse sometimes, a good excuse oft-times and a threadbare excuse many times. Do not overwork it. You are not the only busy nurse.

Another member says, "If I could talk as easily and interestingly as Miss Blank I would gladly take active part, but I"—etc. You will find, if you observe closely, that it is not always the eloquent Miss Blanks who call forth the most responses and really do the meeting the most good. A few remarks from an earnest but embarrassed speaker will frequently do as much to put the spirit of the meeting on a congenial basis as the well delivered speech of a gifted member.

Then there is that obsolete excuse, "I know so little about parliamentary law," which is not an excuse today, but a reason. You will find that "new occasions teach new duties," and whether your future life be spent in the sick room or the home you will have to know something of club work if you would "keep abreast of truth." Personally, I know of no better place to begin training along that line than in your alumnae association where members are your friends and not inclined to be over-critical.

Many nurses do not appreciate the importance of organized work. A little study of the history of nursing and of the field today would throw clearer light on the situation. It seems to be some one's duty to see that this is done. Perhaps instruction along that line should play a more important part in the curriculum of the last months of training. It may be the duty of our alumnae associations to see that this is done. We say to the graduating class, "We need you in our association," but that is not forceful enough. They are apt to accept it as a polite euphonism. While a student, she thinks of the association in third person plural, "they," "theirs." It is for us to adjust her ideas to first personal singular, "my," "mine." When this is accomplished, they will gladly put a shoulder to the wheel and "carry on."

Have *you* paid your dues?